02-25-05

(P	Ē.) TRANSMITTAL		9 PW	
Complete and send t	1 applicable fee(s), to: Mail		Mail Stop ISSI Commissioner	JE FEE for Patents			
/	2005 H	•		P.O. Box 1450			
FEB	2 3 2005 E		or	Alexandria, VI Fax. (703) 746-4000	rginia 22313-1450	1	
INSTRUCTIONS This fo appropriate. All further co- indicated unless correspond	rm should be used for tran rrespondence including the l beto was directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and ders and not) specifying	PUBLICATION FEE (if reinfication of maintenance fee a new correspondence address	quired). Blocks 1 through 5 s will be mailed to the current ess; and/or (b) indicating a separate	hould be completed where correspondence address as arate "FEE ADDRESS" for	
	CE ADDRESS (Note: Use Block 1 for			Note: A certificate	of mailing can only be used for	or domestic mailings of the	
7.	590 11/26/2004			Fee(s) Transmittal. papers. Each addition have its own certific	This certificate cannot be used onal paper, such as an assignment of mailing or transmission.	for any other accompanying ent or formal drawing, must	
DEAN A. CRAII STE 140	NE			I hereby certify that	Certificate of Mailing or Trans t this Fee(s) Transmittal is bein	smission g deposited with the United	
400 - 112TH AVE NE				States Postal Service addressed to the M	t this Fee(s) Transmittal is being e with sufficient postage for fir fail Stop ISSUE FEE address SPT (703) 746-4000, on the co	st class mail in an envelope above, or being facsimile	
BELLEVUE, WA 02/28/2005 MBERHE1 00000			1 /1_1_		date indicated below. (Depositor's name)		
				DEM	A CRAINE	(Signature)	
82 FC:1584	700.00 GP 300.00 GP			PEBRU	ARY 23, 2005	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/801,143	03/15/2004	7	Lyle To	ownsend	TOWL 101CIP	2186	
TITLE OF INVENTION: ROCK SIMULATING PEST TRAP							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$685		\$300	\$985	02/28/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	コ		
ARK, DARREN W		3643		043-131000			
1. Change of correspondence address or indication of "Fee Address" (37				nting on the patent front page	, list		
CFR 1.363). Change of correspondence address (or Change of Correspondence).			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2 register	ed patent attorneys or agents. name will be printed.	If no name is 3		
Number is required.	RESIDENCE DATA TO B	F PRINTED ON T		<u> </u>			
PLEASE NOTE: Unless		low, no assignee	data will app	pear on the patent. If an ass	ignee is identified below, the o	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Maria da da amarida	· :	mine (verill met he mu	inted on the	natant) . Ditadioidos D	Corporation or other private gr	oun entity Government	
4a. The following fee(s) are	e assignee category or catego		. Payment of	<u> </u>	Corporation of other private gr	oup entity - Government	
XX Issue Fee XXA check in the amount of the fee(s) is enclosed.							
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
_ 0	(from status indicated above	•					
	SMALLENTITY status. See				ALL ENTITY status. See 37.0		
NOTE: The Issue Fee and F interest as shown by the rec	of the United States Date of the United States Date of the United States Date	vill not be accepted ent and Trademark	d from anyon Office.	ny) or to re-apply any previous other than the applicant; a i	usly paid issue fee to the applic registered attorney or agent; or t	he assignee or other party in	
Authorized Signature	MWW. 2			Date]	FEBRUARY 23, 2	005	
Typed or printed name	DEAN A. CRAIN	IE		Registration No. 33,591			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.